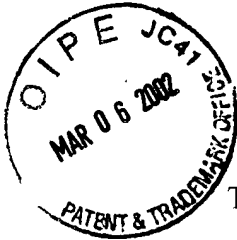


Receipt



PATENT
85CF-00104

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Johnson et al.

Serial No. 09/736,782

Filed: December 14, 2000

For: METHODS AND SYSTEMS FOR
QUANTIFYING CASH FLOW
RECOVERY AND RISK

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Group Art Unit: 2164

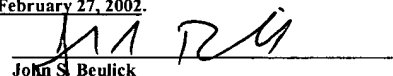
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MAR 19 2002

Technology Center 2100

CERTIFICATE OF MAILING

I certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Office of Initial Patent Examination, Customer Service Center, Washington, D.C. 20231, on February 27, 2002.


John S. Beulick
Reg. No. 33,338

Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231


REQUEST FOR CORRECTION OF FILING RECEIPT

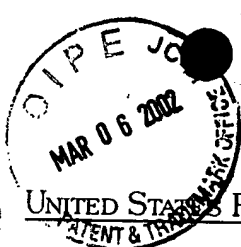
Sir:

Applicant respectfully requests that the Filing Receipt be corrected to set forth the correct spelling of the name of applicant Catharine Lynn Midkiff. Specifically, the Filing Receipt (copy attached) shows the inventor's name as "Catherine Lynn Midkiff". The inventor's name should be "Catharine Lynn Midkiff."

Applicant further requests that a new, corrected filing receipt be issued.

Respectfully submitted,


John S. Beulick, Reg. No. 33,338
ARMSTRONG TEASDALE LLP
One Metropolitan Square, Suite 2600
St. Louis, Missouri 63102-2740
314-621-5070



UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/736,782	12/14/2000	2164	966	85CF-00104	14	27	3

CONFIRMATION NO. 8893

UPDATED FILING RECEIPT



OC000000006154150

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Date Mailed: 06/06/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Christopher Donald Johnson, Clifton Park, NY;
Tim Kerry Keyes, West Redding, CT;
David Jonathan Spencer, Bangkok, THAILAND;
Catharine ~~Catherine~~ Lynn Midkiff, Bangkok, THAILAND;
Richard Paul Messmer, Rexford, NY;
Chandrasekhar Pisupati, Niskayuna, NY;
Yu-to Chen, San Ramon, CA;

Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/173,843 12/30/1999

Foreign Applications

If Required, Foreign Filing License Granted 02/21/2001

Projected Publication Date: 06/20/2002

Non-Publication Request: No

Early Publication Request: No

ENTERED

Date: 6-11-01

By: *ent*

17243-6

Title

Methods and systems for quantifying cash flow recovery and risk

Preliminary Class

705

Data entry by : KIM, JONATHAN

Team : OIPE

Date: 06/06/2001



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Bib Data Sheet

CONFIRMATION NO. 8893

SERIAL NUMBER 09/736,782	FILING DATE 12/14/2000 RULE	CLASS 705	GROUP ART UNIT 2164	ATTORNEY DOCKET NO. 85CF-00104
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APPLICANTS

Christopher Donald Johnson, Clifton Park, NY;
Tim Kerry Keyes, West Redding, CT;
David Jonathan Spencer, Bangkok, THAILAND;
Catharine Lynn Midkiff, Bangkok, THAILAND;
Richard Paul Messmer, Rexford, NY;
Chandrasekhar Pisupati, Niskayuna, NY;
Yu-to Chen, San Ramon, CA;

#6

** CONTINUING DATA *****

THIS APPLN CLAIMS BENEFIT OF 60/173,843 12/30/1999 ✓ HTD

** FOREIGN APPLICATIONS *****

✓ No. HTD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/21/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 14	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials HTD				

ADDRESS

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TITLE

Methods and systems for quantifying cash flow recovery and risk

FILING FEE RECEIVED 966	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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